Form **8871**(July 2000)

Political Organization Notice of Section 527 Status

OMB No. 1545-1693

POSTMARK DATE JUL 3 1 2000

Department of the Treasury Internal Revenue Service

Pa	General Information			
1				Employer identification number
_	California Healthcare A	ssociation PAC		94 2723946
2	Mailing address (P.O. Box or number,	street, and room or suite	number)	71 , 2,20,10
	1215 K Street, suite 8			
	City or town, state, and ZIP code			
	Sacramento, CA 95814			
3	E-mail address of organization			
4a	Name of custodian of records	4b Cu	ustodian's address	
			1127-11th Street, Sui	te 300
	J. Richard Eichman	<u> </u>	Sacramento, CA 95814	
5a	Name of contact person	5b Co	ontact person's address	
			1127-11th Street, Sui	te 300
	्रुJ. Richard Eichman		Sacramento, CA 95814	
6	Business address of organization (if di	fferent from mailing addr	ess shown above). Number, street, a	and room or suite number
	·			
	City or town, state, and ZIP code			
Pa	rt II Purpose			
7	Describe the purpose of the organizati	ion		
	To support or oppose	candidates		

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Pa	rt III List of All Related Enti	ities (see instruction	(a)	
8a		8b Relationship	8c Address	
			1201 K Street, Su	uite 800
			***************************************	***************************************
Cal	ifornia Healthcare Assn	Sponsor	Sacramento, CA 95	5814
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For Paperwork Reduction Act Notice, see page 4.

ıme	9b Title	9c Address
		1127 11th Street, Suite 300
J. Richard Eichman	Treasurer	Sacramento, CA 95814
		•••••••••••••••••••••••••••••••••••••••
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Revenue Code, and that I have	clare that the organization name	ned in Part I is to be treated as an organization described in section 527 of the accompanying schedules and statements, and to the best of my knowledge an
it is true, correct, and complete	11,1%	
	/W/W_	
Signature of authorized of	official	Date